



**Robert E. Bush**  
Naval Hospital

## Did you know?...

**Y**ou have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

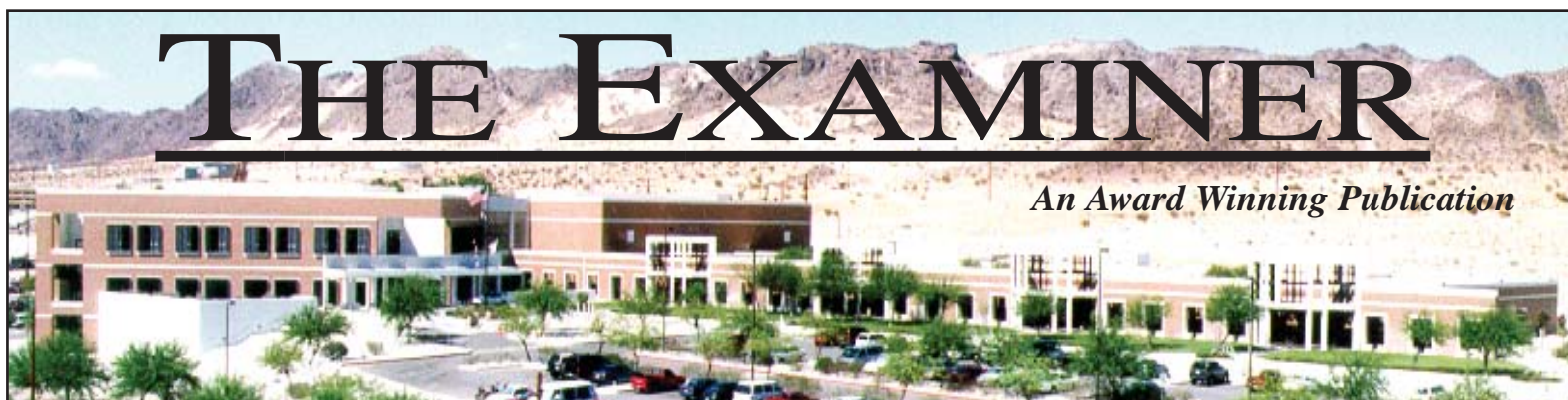
- \* Through the ICE website.
- \* The Hospital Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the Hospital clinics, or directly to the Joint Commission via:  
E-mail at [complaint@jointcomission.org](mailto:complaint@jointcomission.org)  
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The Joint Commission  
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Oakbrook Terrace, IL 60181

**T**o report Fraud, Waste and Abuse contact one of the below offices by calling:

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Commanding Officer  
Naval Hospital Public Affairs Office  
Box 788250 MAG/TFIC  
Twentynine Palms, CA 92278-8250



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<http://www.med.navy.mil/sites/nhtp/pages/default.aspx>

# Naval Hospital Appoints New Ombudsman

*By Hospitalman Jeyzon Fernandez Jimenez*  
*Public Affairs Staff/Editor*  
*Robert E. Bush Naval Hospital*



**Mr. Bright Opoku, Command Ombudsman.**

**N**aval Hospital Twentynine Palms proudly welcomes Mr. Bright Opoku as the new Command Ombudsman.

What is an ombudsman? An ombudsman is a volunteer, chosen by the Commanding Officer (CO), on call 24 hours a day, seven days a week.

An ombudsman is also a

spouse of an active duty or selected reserve member assigned to the command who serves as the official liaison between the command and its families. The ombudsman assists the CO in maintaining the morale and welfare of the command's service members and its families.

According to OPNAVINST 1750.1G, the Ombudsman Program was introduced to the Navy by z-gram 24 on Sept. 14, 1970, by Chief of Naval Operations (CNO), Adm. Elmo Russell Zumwalt, Jr. A z-gram is a list of policy directives issued by Zumwalt while in office as the CNO (from July 1, 1970 to July 1, 1974).

Zumwalt adapted this program from a 19th century Scandinavian custom originally established by the king to give ordinary private citizens an avenue to express their grievances to high government officials.

To support the command's

mission and improve family readiness, the ombudsman acts as an advocate for families and Sailors. He helps to disseminate accurate information regarding command policies, services available, resource referral and deployments.

He is a confidential point of contact for families and Sailors and refers them to the appropriate agency for questions, concerns, aid, or intervention. The ombudsman is an effective resource for hearing about the welfare of command families.

To clarify, the ombudsman is not a trained counselor or social worker, but can show you the way to solving your problems or getting assistance.

Furthermore, Ombudsman Appreciation Day is on Sept. 14 (or the Friday preceding the 14th, if it falls on a weekend). Since the 14th is of significance to the history of the program, commands are authorized to celebrate the event at any time deemed appropriate during the month of September or as soon

*Continued on page 7*

## Navy Heritage Ball Celebration...



**Capt. Jay C. Sourbeer, M.D., left, Commanding Officer, Naval Hospital Twentynine Palms, joins Capt. Sandra A. Mason, center, Nurse Corps, Director for Nursing Services, and HA Cristian R. Figueroa Reyes, right, Adult Medical Care Clinic, both representing the youngest and oldest Sailors cutting the ceremonial cake inside the historical USS Midway Aircraft Carrier Museum, Saturday, 17 Aug. 2013, in San Diego, Calif.**

**Patients seen in July -- 11,984**

**Appointment No Shows in July -- 784**

In July we had a 6.1 percent no show rate. We need to keep trending downward by keeping the appointments we make, or by canceling in enough time for someone else to use the slot...

To help patients obtain appointments, the Naval Hospital now shows the number of open appointment slots each day on the hospital Facebook site, check it out.

**To make an appointment call -- 760-830-2752**

**To cancel an appointment call -- 760-830-2369**



# What Sort of Privacy Do You Have on Web Searches?

*By Martha Hunt, MA, CAMF  
Health Promotion and Wellness  
Robert E. Bush Naval Hospital*

All of us search the internet for medical information - everything from dosing and side effects of our meds to symptoms we may have.

What you may not realize is who is also looking at your search and collecting data on you. Most web sites that offer free health information also track what topics are searched and target advertisements related to those topics.

For example, when you search for something as simple as a certain vitamin and the next time you open your Facebook page, there are ads in your margins targeted to the same vitamin brand you were searching for a few days earlier.

A recent research letter published in the Journal of the American Medical Association

(JAMA) discusses how a medical researcher tested twenty different medical information pages and found that online searches for health topics are not as anonymous as you think.

Even if the web site does not ask for personal information such as your name, it still records your computer's IP address which is unique to your computer.

Not only is your computer's internet protocol (IP) address recorded by these sites, but there may be bits of codes being transmitted to your computer, which then sends your information on to third parties.

These third parties then take this information that you have unknowingly provided and target you with advertising for that topic and related topics, track your searches, track purchases you may make on the site and keep a record of every topic you ever searched on that site.

The researcher used intercept

tion tool software and found that searches were leaked to third-party tracking entities by seven of the 20 websites he studied.

These sites were [www.nhs.uk](http://www.nhs.uk), [www.mdlinx.com](http://www.mdlinx.com), [www.drugs.com](http://www.drugs.com), [www.men-shealth.com](http://www.men-shealth.com), [www.health.com](http://www.health.com), [www.foxnews.com/health](http://www.foxnews.com/health) and [www.nytimes.com/health](http://www.nytimes.com/health).

In contrast, search terms were not leaked to third-party tracking sites when done on U.S. government sites (Food and Drug Administration, National Institutes of Health, Centers for Disease Control and Prevention, National Cancer Institute, PubMed and MedlinePlus) or four of the five physician-oriented sites (New England Journal of Medicine, JAMA, JAMA Internal Medicine and Medscape). Mayo Clinic's medical information website was also safe to use with regard to third party tracking.

It is unknown whether leaked

information was misused by these third parties. However, if they are tracking your computer's IP, then they also know that this is the same computer that previously visited the site, how many times you visited and will compile a list of search terms you have used over time.

The web sites - which allow this data collection on you - are also making money on this activity since they are paid by the third party to place ads on the site.

While these third parties are only using this data for marketing ads to the person doing the search, it leaves open the question of privacy and anonymity.

So far, there is nothing done with your search information except targeting ads to match your search. However, there is always the possibility that the data could be reviewed by your IP address to see what diseases or health conditions you have

been searching online.

The researcher who conducted these online searches suggests that anyone concerned about the privacy of their health-related online searches either use government sponsored websites and professional medical society websites or download free privacy tools, such as DoNotTrackMe and Ghostery.

Since the release of this research in July, the Illinois State Attorney General has opened an inquiry into the data-mining practices of websites named in the study. The entire research article for this study can be found in the July 8, 2013, issue of JAMA Internal Medicine. For help evaluating the accuracy of online resources, visit "Evaluating Health Web Sites" at the National Network of Libraries of Medicine - [nnlm.gov/outreach/consumer/evalsite.html](http://nnlm.gov/outreach/consumer/evalsite.html).

## Branch Health Clinic Bridgeport

*By Lisa Escobedo  
Freelance Writer  
Branch Health Clinic Bridgeport*

The Branch Health Clinic Bridgeport, located 17 miles north of Bridgeport, Calif., just eight hours north of Twentynine Palms, Calif., specializes in rendering medical services to military personnel and their families.

Another special aspect of this base is the high elevation terrain, which enables Marines and Sailors to train within a pre-deployment environment. The harsh winters and desert-like environment is what enables and creates the perfect training setting for those who are preparing for upcoming deployments.

While stationed at Bridgeport, whether for temporary or permanent purpose, military members and their dependents can rely on the clinic for providing medical care and answering questions as well as meeting their needs in order to get comfortably settled in.

The mountain scenery is a perk when driving through the canyon to get to this small but unique base. The clinic is currently staffed with eight junior

Sailors, an Independent Duty Corpsman (IDC) and a family physician.

Some of their duties include, but are not limited to: drawing blood, patient check-in, Defense Enrollment Eligibility Reporting System (DEERS) and TRI-CARE enrollment for Marines and families who are new to the area.

Adhering and complying with monthly training that is required by Corpsmen is what enables them to remain mission ready and provide the appropriate care when needed.

In this northern location, the naval clinic embraces their overall mission of providing health-care services in all types of conditions, despite weather and remote location challenges.

Each year, specific clinic inspections are required to meet and exceed passable expectations. To do this, Corpsmen come together to ensure all areas comply with Navy, Department of Defense (DoD), state, and federal regulation in order to maintain a successful and safe environment for patients and meet requirements.

The dynamic of the clinic is

*Continued on page 3*

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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# Emergency Cesarean Section Training for the Maternal Infant Nursing Department

*By Lt. Cmdr. Fleming L. French, NC, MSN, CNOR*

*Main Operating Room*

*Robert E. Bush Naval Hospital*

Emergency cesarean section (c-section) deliveries are not common occurrences at Naval Hospital Twentynine Palms, but the Maternal Infant Nursing Department (MIND) and the Main Operating Room (MOR) personnel must maintain a constant state of readiness.

The effect of rotating military staff results in an influx of new nurses and Hospital Corpsmen that require orientation. Training for this low volume, but high risk procedure prepares all team members to perform their best.

Understandably, every moment counts when a mother or baby's life is in jeopardy. To ensure the team works together during an emergency the MOR and MIND leadership developed training to meet this goal.

The class incorporates three main topics: "lessons learned," Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS) communication tools, and equipment familiarization.

In designing the curriculum the instructor strives to make the class relevant and exciting, demystifying the unique and sometimes intimidating environment of the Main Operating Room.

Including learning points from past emergency cases adds to the timeliness of the class. For example, during a recent emergent c-section it was discovered that monitoring an electrocardiogram (EKG) and blood pressure cuff cables were incompatible. The cables are not interchangeable between these two areas.

Passing this information to all staff members prevents others from wasting valuable time making the same mistake.

TeamSTEPPS communication tools assist the group in working efficiently during stressful situations. The first critical step during an emergency is identifying a leader. This person must take charge of the situation by briefing the team with a plan and ensuring everyone knows their

role.

Team members assist the flow of information by calling out their actions, in a loud voice. This prevents two individuals from performing the same task and notifies the leader they own the job.

The students are encouraged to project their voices when they call out to overcome the noise level encountered during an actual emergency. The final communication concept reviewed is mutual respect for all team members.

A respectful attitude fosters an environment valuing the skills and ideas of everyone. The strength of the group arises from the sum of all the parts, rather than the effort of one individual.

Simulation training works well for this audience of highly motivated adult learners. The class begins in an unoccupied MIND room. The instructor gives the students a scenario requiring a rapid transfer of an MIND patient to the MOR for an emergency c-section. Someone not participating in the class plays the patient.

During the initial simulation, the instructor evaluates the

team's ability to work together. With no instruction, the participants typically struggle and needlessly search for supplies.

The confusion the team experiences helps them understand the importance of the training. The instructor debriefs the group after the first trip to the MOR. Students receive tools to improve communication; ensuring that everyone realizes their responsibilities.

Next, the class is given a hands-on tour of key equipment in the operating room. The instructor demonstrates the function of suction, electrocautery, surgical lights and the MOR table. The students repeat the demonstration, until all are confident in manipulating the gear.

Positioning the patient using a right hip roll is demonstrated and the teacher reinforces this intervention by ensuring the students take into consideration the unique physiological condition of the patient. A hip roll off sets the weight of the gravid uterus preventing pressure on the aorta when the patient lies flat.

Next, the instructor reviews the two surgical skin prepara-

tions options. Most commonly Cloraprep is utilized but, Betadine Paint is available to splash on the surgical site during more urgent situations.

After all questions are answered, the class repeats the drill. The team undergoes a remarkable transformation. The MIND nurse takes charge, and the team moves with purposeful effort and a shared mission. They work together safely and quickly transition the patient from a vaginal delivery to a surgical procedure.

The month of September is already here and the weather outside is over 100 degrees Fahrenheit at Naval Hospital Twentynine Palms. New staff members continue to arrive at our desert spa daily.

As summer bears down, we continue orienting new staff members to our unique environment. An important part of assuring everyone is prepared for an emergency delivery is having a clear mission.

We are the facility of choice for our patients because the highest quality of care is provided.

## Flash Flood Season

*By Ensign Saintheresa L. Jackson*

*Maternal Infant Nursing Dept.*

*Robert E. Bush Naval Hospital*

Flash floods are one of the most destructive natural disasters in the United States.

Flash floods can create devastation throughout cities and communities. A flash flood can damage farming areas, private property, roads as well as railways.

According to the National Oceanic and Atmospheric Administration, a flash flood is defined as a flood caused by heavy or excessive rainfall in a short period of time, generally less than six hours. How forceful rain falls and how long the rainfall last are factors that contribute to a flash flood.

Flash floods can occur at any time without any warning. If you live in an area at risk for flooding, have an evacuation plan. Always be prepared to

evacuate on a moment's notice.

Find higher ground during a flooding event. Never attempt to walk across flowing streams. Just six inches of swift moving water can knock a person down.

It is important to know that over half of flash flood fatalities occur in vehicles. Most people do not know that two feet of rushing water can carry away many vehicles, including sport utility vehicles and pick-up trucks.

One should not attempt to drive over a flooded road. How deep the water is may not be obvious. The road bed may be washed out under the water and you could become stranded or trapped in your vehicle.

Remember, safety first in flood situations. Know in advance if your area is a flood risk.

For more information on your areas flood risk, contact your local Red Cross chapter, emergency management office, and your local National Weather Service office.

## Branch Health Clinic Bridgeport...

*Continued from page 2*

broken into separate areas of expertise. As an instance, the front desk Corpsmen ensure all questions are answered and problems are addressed before any one patient is to be seen by a provider.

The pharmacy within the clinic is managed by HM3 Jordan A. Burchfiel, Pharmacy Technician, and provides patient care while managing adequate supply and inventory of medications.

The laboratory is managed by HM3 Albert Escobedo, Laboratory Technician, who provides physical screenings, lab processing and testing, and oversees clinic safety program.

HN James Gibbens, Preventive Medicine Technician, performs inspections and surveys of food, food service, childcare and recreational facilities.

In addition to adhering to technical responsibilities in each of their own specialties, these

Corpsmen also perform duties outside their normal workload by multitasking in other areas of healthcare, which enables them to exceed the demands of the clinic.

HMC Elliott O. Martinez, Independent Duty Corpsman, and HM1 Jon C. Turk,

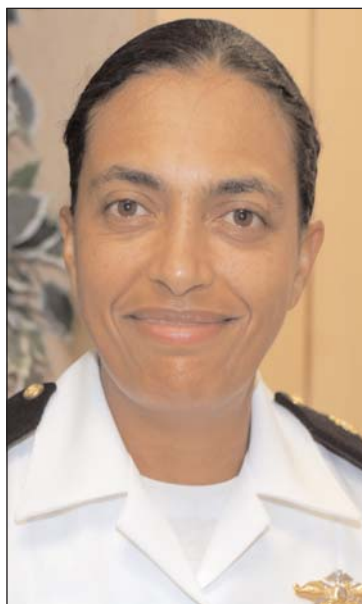
Radiology Technician, oversee the main mission on a daily basis to ensure the staff works cohesively to successfully deliver appropriate medical care for their patients while building trust, rapport, and maintaining confidentiality.



# Super Stars...



**Cmdr. Brenda D. Smith, Director of Branch Health Clinics and Industrial Hygiene Officer, Public Health Services Department, receives a Gold Star in lieu of her third Meritorious Service Medal.**



**Cmdr. Katharina Pellegrin, Staff Surgeon on the General Surgery/Orthopedics Department, receives a Navy and Marine Corps Commendation Medal from the General Surgery Department at Naval Hospital Camp Pendleton, Calif., her previous former command.**

**Lt. Sarah L. Wilson, a Staff Social Worker on the Mental Health Department, receives a Navy and Marine Corps Commendation Medal.**



**Lt. Cmdr. Anne M. Jarrett, an Audiologist on the Public Health Services Department, Directorate for Branch Clinics, receives a Gold Star in lieu of her third Navy and Marine Corps Commendation Medal.**



**Lt. Cmdr. Mark L. Woodbridge, Department Head of Medical Home Port Gold Team, receives a Gold Star in lieu of his second Navy and Marine Corps Commendation Medal.**



**Lt. Marcus M. Allen, Department Head of Patient Administration Department, receives a Gold Star in lieu of his third Navy and Marine Corps Commendation Medal.**



**HM2 Julian S. Guillen, Biomedical Equipment Technician, Material Management Department, receives his third Good Conduct Award.**



**Lt. Amber E. Wilson, a Staff Nurse on the Maternal-Infant Nursing Department, receives a Gold Star in lieu of her second Navy and Marine Corps Achievement Medal.**



**HM3 Alexander G. Rosales, Assistant Leading Petty Officer (ALPO), Patient Centered Medical Home Blue Team, receives a Navy and Marine Corps Achievement Medal.**



**HN Brandon J. Barez, Assistant Leading Petty Officer (ALPO), Family Medicine Gold Team, receives a Navy and Marine Corps Achievement Medal.**

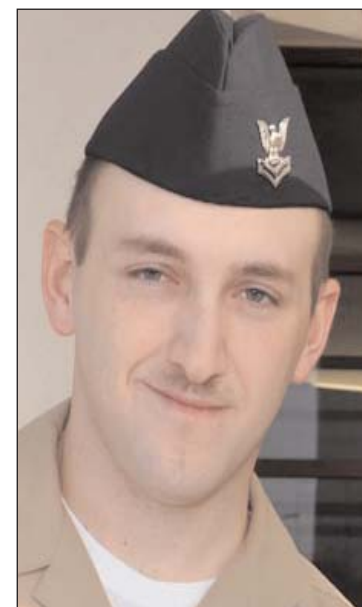
**CS2 Jarred S. Martin, Combined Food Services Department, receives his second Good Conduct Award.**



**HM1 (FMF) Raul M. Cervantes, Director for Surgical Services' (DSS) Directorate Leading Petty Officer (LPO), receives his fourth Good Conduct Award.**



**HM2 (SW) Andy A. Rogero, Leading Petty Officer (LPO), Patient Centered Medical Home Blue Team, receives his third Good Conduct Award.**







*Naval Hospital Twentynine Palms's soccer team, Bandits, consecutive victories: MCCES Galaxy (18 to 1); CLB-7 Los Sucios (5 to 3); 3rd LAR Wolf Pack 1 (7 to 5); 3/11 Infields (8 to 1); Chaos (9 to 4); MCCES HQ 2 (18 to 1); 2/7 Echo Desert Tortoises (7 to 0); 3rd LAR Wolf Pack 2 (13 to 1); MCCES HQ 1 (9 to 1).*



*HM3 (SW) Thomas W. Hess, Adult Medical Care Clinic, receives his first Good Conduct Award.*



*HM3 Sharina M. Colter, Obstetrics/Gynecology Clinic and Multi-Service Ward Department, receives a Navy and Marine Corps Achievement Medal.*



*HM1 (SW/AW) Tracy Ashley, HMC Select, Public Health Services Department, takes the oath at his recent reenlistment ceremony for four more years, Thursday, 15 Aug. 2013, in Twentynine Palms, Calif.*



*HMC (FMF/CAC) Gil H. McGillivray is piped ashore as he retires after serving honorably in the United States Navy, Friday, July 26, 2013, in Twentynine Palms, Calif.*



*HN Kelly J. McFarlin Jr., Emergency Medicine Department, receives his first Good Conduct Award.*



*HM2 (FMF) Steven N. Diaz, Leading Petty Officer (LPO), Directorate for Nursing Services and Emergency Medicine Department, receives a Navy and Marine Corps Commendation Medal.*



*Naval Hospital Twentynine Palms proudly welcomes home Lt. Natalie R. Correll, who just returned from deployment as an Individual Augmentee. Correll is assigned to the Emergency Medicine Department.*



*Navy Chief Petty Officer Tamara Marks, right, and husband, Army Sgt. 1st Class William Marks, left, are saluting the Ensign for evening Colors during their combined retirement ceremony, Friday, Aug. 2, 2013, in Twentynine Palms, Calif. Both served the United States Armed Forces with Honor, Courage, Commitment and Integrity.*



*Lt. Cmdr. Richard J. Eppy, a Staff Physician on the Obstetrics and Gynecology Department, receives a Navy and Marine Corps Achievement Medal.*



*Lt. Faye Ellen Sundahl, an Obstetrician on the Obstetric and Gynecology Department, receives a Navy and Marine Corps Achievement Medal.*



*Naval Hospital Twentynine Palms proudly welcomes home Lt. Leslie F. Crawford, who just returned from deployment as an Individual Augmentee. Crawford is assigned to the Emergency Medicine Department.*



# Introducing New Staff - Welcome Aboard



*Ms. Teresa M. Turbyfill*

*Ms. Teresa M. Turbyfill recently joined Naval Hospital Twentynine Palms's Quality Management team as the new infection preventionist.*

*She came from Hi-Desert Medical Center where she worked as a critical care (ICU) nurse, medical/surgical nurse, nursing supervisor, and interim director. She has extensive experience in the area of infection prevention and control and Joint Commission Readiness.*

*She has implemented proper measures in reducing infections and developed process improvements to maintain a low infection rate at her previous employment. Turbyfill said, "I am excited to be here at Robert E. Bush Naval Hospital. My goal is to work with all disciplinary team members in strengthening the Infection Prevention and Control Program and to reduce risks of infections at this facility and clinics."*

*She received a Bachelor of Science in Nursing (BSN) degree in 2001 from Point Loma Nazarene University, Calif. She is currently completing her Master of Science in Nursing (MSN) degree in Leadership and Healthcare Management from Jacksonville University, Fla.*

*Turbyfill is married to a retired Marine and lives locally here in Twentynine Palms, Calif.*

*You can reach Turbyfill at [teresa.turbyfill@med.navy.mil](mailto:teresa.turbyfill@med.navy.mil) or her work phone number, (760) 830-2855.*



*Lt. Katie A. Camp*

*Naval Hospital Twentynine Palms proudly welcomes Lt. Katie A. Camp as its newest member of the Directorate of Nursing Services (DNS) team.*

*Camp, an Emergency Room and intensive care unit (ICU) nurse by trade, will be assuming the role of Division Officer on the Multi-Service Ward*

*(MSW) Department.*

*Camp is a graduate of the University of Southern Mississippi, Miss. Afterwards she attended the University of South Alabama, Ala., earning a Bachelor of Science in Nursing (BSN).*

*She is reporting to Naval Hospital Twentynine Palms from Naval Medical Center San Diego. Other duty stations include: Naval Hospital Camp Lejeune, Naval Hospital Guantanamo Bay, Cuba, and the North Atlantic Treaty Organization (NATO) Role III Multinational Medical Unit (MMU), Kandahar, Afghanistan.*

*Of personal note, Camp hails from the Gulfport, Miss. Her hobbies include rock climbing, hiking, camping, surfing, snowboarding, yoga, cross fit, running, hanging out with her old English bulldog, and watching NFL football - Go Saints!*



*Lt. Cmdr. Kimberly A. Whitehill*

*Naval Hospital Twentynine Palms proudly welcomes Lt. Cmdr. Kimberly A. Whitehill as its newest member of the Directorate of Branch Clinics (DBC) team.*

*Whitehill, a Family Nurse Practitioner by trade, will be assuming the role of Senior Medical Officer at the Adult Medical Care Clinic.*

*Whitehill is a graduate of the University of San Diego. She is reporting to Naval Hospital Twentynine Palms from Naval Hospital Camp Pendleton. Other duty stations include: San Diego and Duty Under Instruction (DUINS).*

*Of personal note, Whitehill hails from the great state of Texas. She has been in the Navy for more than twenty-two years as an enlisted submarine finder and a nurse corps officer.*

*Her favorite hobby is reading, but she also enjoys traveling, riding bikes and hiking.*



*Lt. Cmdr. Nathan C. Hawkes*

*Naval Hospital Twentynine Palms proudly welcomes Lt. Cmdr. Nathan C. Hawkes as its newest member of the Directorate of Clinical Support Services team.*

*Hawkes will be assuming the role of Department Head of Radiology. Hawkes pursued his studies at Uniformed Services University of the Health Sciences in Bethesda, Md.*

*He is also a Board Certified Radiologist as well as an Undersea Medical Officer.*

*Of personal note, Hawkes hails from Highland, Utah. His hobbies include activities such as biking, basketball, volleyball, hiking, camping and fishing.*



*Ms. Sondra N. Rehbein*

*Naval Hospital Twentynine Palms proudly welcomes Ms. Sondra N. Rehbein as its newest member of the Directorate of Nursing Services team.*

*Rehbein, a Registered Nurse,*

*Continued on page 7*

## New Ombudsman...

*Continued from page 1*

as possible thereafter.

As a confidential point of contact for family members of the military staff, Mr. Opoku, the ombudsman, can be used as a reference and referral guide. For situations that need assistance, he is able to provide you with information on various resources around the base that may help.

Resource connections for

Sailors and family members such as the Navy-Marine Corps Relief Society (NMCRS), located at the Village Center (Bldg. 1551), provides financial assistance in difficult times; the DStress hotline, (877) 476-7734 / Dstressline.com, available 24 hours a day, seven days a week for emotional support; and the TRICARE Service Center, which provides health care services such as appointment scheduling and Defense Enrollment

Eligibility Reporting System (DEERS) registration, are just a few of the many resource links that are listed in the Ombudsman Newsletter, which is generated and published every two months via the command e-mailing platform.

You may contact Mr. Opoku by phone at (760) 910-2050, or by email at [nhtpombudsman@yahoo.com](mailto:nhtpombudsman@yahoo.com).

## How to Protect Your Health During Forest Fire Season

*By Martha Hunt, MA, CAMF  
Health Promotion and Wellness  
Robert E. Bush Naval Hospital*

**T**his year has been the worst fire season in many years.

If you have health issues such as asthma or heart problems, you know that the fires have made your health much worse.

While fires can be started on purpose for forest management, by accident from lightening or by stupidity through human action, the smoke resulting from these fires can travel hundreds of miles and have a huge impact on human health.

According to the Environmental Protection Agency (EPA), smoke is made up of gases and fine particles produced when wood and other organic matter burn.

The biggest health threat from smoke comes from the fine particles which get into your eyes and lungs causing problems such as burning eyes, runny nose, and illnesses such as bronchitis.

People with heart and lung diseases are at greatest risk from the smoke and can even die from forest fire smoke.

Children and older adults are also likely to be affected by smoke. Older people are more likely to have heart or lung diseases than younger people.

Children are more susceptible to smoke because their lungs are still developing and they are more likely to be active out-

doors. Children with respiratory diseases such as asthma should be monitored closely during smoke alerts.

How do you tell if smoke is affecting you? Smoke can cause coughing, a scratchy throat, irritated sinuses, headaches, stinging eyes or a runny nose. People with heart disease might experience chest pain, palpitations, shortness of breath, or fatigue while those people with lung disease may struggle to breathe and may experience symptoms such as coughing, phlegm, chest discomfort, wheezing and shortness of breath.

How can you protect yourself? If you detect smoke in the air, check the local media for information on air quality. You can also look up the local EPA's Air Quality Index (AQI). This information can be found at the EPA sponsored site "EnviroFlash," which is available at [www.enviroflash.info/](http://www.enviroflash.info/) or as a free iTunes App.

The AQI tells you how bad the air is and what health and activity precautions to take. You can also find out the AQI forecast for your area just like a weather forecast, so you can predict the air quality a day in advance.

Another way to protect oneself from forest fire smoke is to use common sense when there are fires reported downwind of Morongo Basin. If it looks smoky outside, it is not a good time to be outdoors or for your children to play outdoors.

To keep your indoor air clean, keep your windows and doors

closed when possible. If you have air conditioning, run it. Yes, electricity is expensive but it is cheaper than a trip to the Emergency Room (ER) when you are having a health crisis.

Keep the fresh air intake closed and the filter clean to prevent bringing additional smoke inside. Avoid using anything that burns, such as wood fireplaces, gas logs, gas stoves or candles.

Do not vacuum when there is smoke in the air as that will stir up dust and smoke particles from your floor and rugs.

Do not smoke tobacco (including electronic products such as e-cigarettes) as that puts even more pollution into your lungs and the lungs of people around you.

Be prepared for forest fire smoke. We cannot stop the smoke from reaching us here in Morongo Basin, but there are steps we can take to prevent the health problems associated with breathing smoky air.

For more information on air quality, smoke advisories and how forest fires affect our health, go to [www.epa.gov/airnow/smoke](http://www.epa.gov/airnow/smoke). For information on indoor air quality, go to [www.epa.gov/iaq/ia-intro.html](http://www.epa.gov/iaq/ia-intro.html).

You can also access the Mojave Desert Air Quality Management District at <http://www.mdaqmd.ca.gov/> for information on local air quality as well as ways to keep our air in Morongo Basin clean and safe.

## Welcome Aboard...

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*will be assuming the role of staff nurse on the Maternal Infant Nursing Department (MIND). Rehbein pursued her studies at Norwich University in Northfield, Vt. Of personal note, Rehbein hails from Montrose, Colo. Her hobbies include activities such as hiking and volleyball.*





# Super Stars...

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HM2 (SW/AW) Marvin Galapin, right, Leading Petty Officer (LPO), Patient Administration Department, takes the oath at his recent reenlistment ceremony for six more years at the Navy Heritage Ball inside the USS Midway Aircraft Carrier Museum, Saturday, 17 Aug. 2013, in San Diego, Calif.



The Medical Service Corps (MSC) celebrates 66 years of faithful and dedicated service to the Navy, Marine Corps, their families and all others they serve around the world. Lt. j.g. Anna Pedraza, left, Laboratory Department, and Lt. Cmdr. Brennan S. Autry, right, Director for Administration, are both representing the youngest and oldest MSCs at the cake-cutting ceremony.



Lt. Cmdr. Brenda K. Reseter, left, Department Head of Obstetrics and Gynecology Clinic, receives a Navy and Marine Corps Commendation Medal from Capt. Jay C. Sourbeer, M.D., right, Commanding Officer, Naval Hospital Twentynine Palms.



Gaylord Perry Jackson, right, Operations Management Central Files Division, was recognized at a departmental luncheon by Lt. j.g. Patricia Opoku, left, Department Head of Operations Management Central Files Division.



Capt. Sandra A. Mason, Nurse Corps, Director for Nursing Services, front and center, is in company of the Montford Point Marines at the Malcom X Library and Performing Arts Center, Friday, Aug. 9, 2013, in San Diego, Calif. The Montford Point Marines were the Marine Corps's first Negro military unit, whom are also recipients of the Congressional Gold Medal.



HM3 Joshua H. Culp, right, Assistant Command Career Counselor, takes the oath at his recent reenlistment ceremony for three more years at the Navy Heritage Ball on the Flight Deck of the USS Midway Aircraft Carrier Museum, Saturday, 17 Aug. 2013, in San Diego, Calif.



From left to right: LSCS (AW/SW) Jose N. Valentin, Senior Enlisted Leader, Acting Command Master Chief, Capt. Jay C. Sourbeer, M.D., Commanding Officer, Naval Hospital Twentynine Palms, Capt. Angel S. Nimmo, Nurse Corps, Executive Officer, and Gen. John M. Paxton, Jr., II Marine Expeditionary Force, 1st Marine Division. Paxton visits Robert E. Bush Naval Hospital, Monday, July 29, 2013, in Twentynine Palms, Calif.